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Pages: 15 (including this page)

To: USPTO

From: Cynthia K. Nicholson

Fax No.: 571-273-8300

Subject: Amendment

Comments:

Applicant: Yazaki

Serial No.: 10/662,368

Filing Date: 9/16/2003

Atty Dkt.: 01-241-DIV-RCE

Title: METHOD FOR MANUFACTURING PRINTED WIRING BOARD

Attached please find:

- (1) Transmittal form;
- (2) Fee transmittal form;
- (3) Petition for Extension of Time (2 months); and
- (3) 11-page Amendment

CERTIFICATE OF FACSIMILE TRANSMISSION

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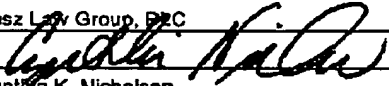
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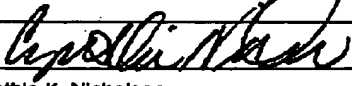
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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>		Application Number	10/662,368
		Filing Date	9/16/2003
		First Named Inventor	YAZAKI
		Art Unit	3729
		Examiner Name	Carl J. ARBES
Total Number of Pages in This Submission		Attorney Docket Number	01-241-DIV-RCE

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance communication to (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Posz Law Group, P.C.		
Signature			
Printed name	Cynthia K. Nicholson		
Date	6 July 2006	Reg. No.	36,880


CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Signature			
Typed or printed name	Cynthia K. Nicholson	Date	6 July 2006

FEE TRANSMITTAL	Application Number	10/662,368
	Filing Date	9/16/2003
	First Named Inventor	YAZAKI
	Examiner Name	Carl J. ARBES
	Art Unit	3729
<input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27		Attorney Docket No. 01-241-DIV-RCE
TOTAL AMOUNT OF PAYMENT (\$)		450

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METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> None <input type="checkbox"/> Other (please identify):	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>50-1147</u> Deposit Account Name: <u>Posz Law Group, PLC</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	
<input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>	
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	\$
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	160	80	0	0	0	0	
2. EXCESS CLAIM FEES							
<u>Fee Description</u>							<u>Small Entity</u>
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent							<u>Fee (\$)</u> <u>Fee (\$)</u>
							50 25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent							200 100
Multiple dependent claims							360 180
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>			
- 20 or HP =	x	=		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>		
HP = highest number of total claims paid for, if greater than 20							
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				
- 3 or HP =	x	=					
HP = highest number of independent claims paid for, if greater than 3							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$ (\$ for small entity)							
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.18(s).							
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			
- 100 =	/ 50 =	(round up to a whole number) x	=				
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other: <u>Petition for Extension of Time (2 months)</u>				450			

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	36,880
Name (Print/Type)	Cynthia K. Nicholson	Telephone	(703) 707-9110
		Date	6 July 2006